

## YOUTH CAPITAL FUND APPLICATION FORM

**.....let's do this!**

**Office use only:**

Date received:		Application number:	
Application decision:		Accepted:	Rejected:

Do you live or go to school in Southwark?

Are you aged 13 to 19?

Do you have a dream or an idea?

If the answer is **yes** to all, please continue to complete your application.

<b>Section one – Applicant’s contact details</b>
Name:
Full Address:
Postcode:
Telephone:
Mobile:
Email:
When is the best time to contact you? We will use this info to contact you about your application.

*...LET'S DO THIS!*



<b>Section two – Project details</b>	
Project Title:	
Please describe how you intend to spend the Youth Capital Fund grant. Please continue on a separate piece of paper if necessary	
What difference will this grant make to young people living in your area?	
Did you come up with this idea?	
When do you expect to spend the money by?	
How many young people will benefit from the new equipment / refurbishment?	
Which of the 5 every child matters outcomes is this activity going to address? (see guidelines for the applicants)	

**Section three – How much will this cost to support?**

Please provide a breakdown of how the grant will be used for your activity. Please show the evidence that costings have been researched e.g. quotes, internet printouts etc.

Item / Description		Cost
1		
2		
3		
4		
5		
6		
Total Cost		
Are any other funders currently considering your proposal? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, who?		

**Section four – Supporting Organisation**

Do you have an organisation that is willing to support your proposal?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, and you would like us to help you find an organisation, please tick box <input type="checkbox"/>	
If yes, please complete details.	
Name of Organisation:	
Contact Name:	
Position:	
Address:	
Telephone:	
Fax:	
Email:	

**Section five – declaration**

Please note – if you are emailing this form you will need to post section six to us and make sure that there are two different people signing this declaration.

**Your declaration**

To the best of my knowledge all the information in this application is true and correct.  
I understand that you may ask for additional information when you are assessing this application.  
If a grant is offered it will be used exclusively for the purposes specified by the Southwark Council

Signed		Date	
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{Supporting Organisation/project/centre}  
I support this application and confirm that if a grant is offered by Southwark Council it will be used exclusively for the purpose specified

Signed		Date	
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**Checklist**

Before you post this application, you must check the following:

- Have you filled in every question on the application form?
- Have you kept a copy of the application form for your own records?
- Signed the declaration (of the copy you have posted)?
- Have you completed and enclosed the diversity monitoring form? (send signed copy)

**Keeping you informed**

We would like to tell you by letter, phone or email about additional services and benefits from Southwark Council that we believe will be of interest to you. If you would like to be contacted, please tick the appropriate boxes:

I wish to receive details on:

- Training opportunities (e.g. youth achievement award, Duke of Edinburgh Award)
- Forthcoming Events

In the future, would you be interested in being a member of the panel of young people? Yes  No

For further guidance, please refer to guideline for applicants, or visit:

[www.whtvr.org/youth-funds](http://www.whtvr.org/youth-funds)

Please return completed application to:

Email: [youthfunds@southwark.gov.uk](mailto:youthfunds@southwark.gov.uk)  
Tel: 020 7525 3867 | 020 7525 1778

Youth Funds Team  
160 Tooley Street  
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